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UNITED STATES DEPARTMENT OF COMMERCE United States Patent and Trademark Office Address: COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, Virginia 22313-1450 www.uspto.gov

# NOTICE OF ALLOWANCE AND FEE(S) DUE

7590

07/26/2005

WILLIAM M SMITH TOWNSENT AND TOWNSEND AND CREW TWO EMBARCADERO CNETER 8TH FLOOR SAN FRANCISCO, CA 941113834 EXAMINER

WILSON, MICHAEL C

ART UNIT

PAPER NUMBER

1632

DATE MAILED: 07/26/2005

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|-----------------|-------------|----------------------|---------------------|------------------|
| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|                 |             |                      | 1.0000 000011       |                  |
| 00/000 255      | 07/08/1007  | HEIDDIN ENGLED       | 16030-000811        | 2270             |

TITLE OF INVENTION: COMPOSITIONS AND METHODS FOR THERAPEUTIC USE

| APPLN. TYPE    | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE   |  |
|----------------|--------------|-----------|-----------------|------------------|------------|--|
| nonprovisional | NO           | \$1400    | \$0             | \$1400           | 10/26/2005 |  |

THE APPLICATION IDENTIFIED ABOVE HAS BEEN EXAMINED AND IS ALLOWED FOR ISSUANCE AS A PATENT. PROSECUTION ON THE MERITS IS CLOSED. THIS NOTICE OF ALLOWANCE IS NOT A GRANT OF PATENT RIGHTS. THIS APPLICATION IS SUBJECT TO WITHDRAWAL FROM ISSUE AT THE INITIATIVE OF THE OFFICE OR UPON PETITION BY THE APPLICANT. SEE 37 CFR 1.313 AND MPEP 1308.

THE ISSUE FEE AND PUBLICATION FEE (IF REQUIRED) MUST BE PAID WITHIN THREE MONTHS FROM THE MAILING DATE OF THIS NOTICE OR THIS APPLICATION SHALL BE REGARDED AS ABANDONED. THIS STATUTORY PERIOD CANNOT BE EXTENDED. SEE 35 U.S.C. 151. THE ISSUE FEE DUE INDICATED ABOVE REFLECTS A CREDIT FOR ANY PREVIOUSLY PAID ISSUE FEE APPLIED IN THIS APPLICATION. THE PTOL-85B (OR AN EQUIVALENT) MUST BE RETURNED WITHIN THIS PERIOD EVEN IF NO FEE IS DUE OR THE APPLICATION WILL BE REGARDED AS ABANDONED.

#### HOW TO REPLY TO THIS NOTICE:

I. Review the SMALL ENTITY status shown above.

If the SMALL ENTITY is shown as YES, verify your current SMALL ENTITY status:

- A. If the status is the same, pay the TOTAL FEE(S) DUE shown above
- B. If the status above is to be removed, check box 5b on Part B Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and twice the amount of the ISSUE FEE shown above, or

If the SMALL ENTITY is shown as NO:

- A. Pay TOTAL FEE(S) DUE shown above, or
- B. If applicant claimed SMALL ENTITY status before, or is now claiming SMALL ENTITY status, check box 5a on Part B Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and 1/2 the ISSUE FEE shown above.

II. PART B - FEE(S) TRANSMITTAL should be completed and returned to the United States Patent and Trademark Office (USPTO) with your ISSUE FEE and PUBLICATION FEE (if required). Even if the fee(s) have already been paid, Part B - Fee(s) Transmittal should be completed and returned. If you are charging the fee(s) to your deposit account, section "4b" of Part B - Fee(s) Transmittal should be completed and an extra copy of the form should be submitted.

III. All communications regarding this application must give the application number. Please direct all communications prior to issuance to Mail Stop ISSUE FEE unless advised to the contrary.

IMPORTANT REMINDER: Utility patents issuing on applications filed on or after Dec. 12, 1980 may require payment of maintenance fees. It is patentee's responsibility to ensure timely payment of maintenance fees when due.

### PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571) 273-2885

| appropriate. All further cor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | respondence including the l<br>below or directed otherwise                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Patent, advance ord                                                                                   | ers and noti                                                                                                             | fication of                                                                                             | of maintenance fees w                                                                                                                                                                                                                                                                         | red). Blocks 1 through 5 s<br>vill be mailed to the current<br>and/or (b) indicating a sepa                                                             | correspondence address as                                                                                                              |  |
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| CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                       |                                                                                                                          | ]                                                                                                       | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. |                                                                                                                                                         |                                                                                                                                        |  |
| 7590 07/26/2005 WILLIAM M SMITH TOWNSENT AND TOWNSEND AND CREW TWO EMBARCADERO CNETER 8TH FLOOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        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| 08/889,355                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             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| APPLN. TYPE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | SMALL ENTITY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            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| nonprovisional                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         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| EXAM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   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| WILSON, N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              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| CFR 1.363).  Change of correspond Address form PTO/SB/12  "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required.  AASSIGNEE NAME AND PLEASE NOTE: Unless                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | prior (or "Fee Address" Indicator more recent) attached. Use PRESIDENCE DATA TO Be an assignee is identified be a 37 CFR 3.11. Completion of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | correspondence  ation form  of a Customer  E PRINTED ON THe clow, no assignee day of this form is NOT | (1) the nar or agents (2) the nan registered 2 registered listed, no nate of the PATENT at a will appear a substitute to | mes of up<br>OR, altern<br>ne of a si<br>attorney<br>d patent a<br>name will<br>(print or<br>ear on the | ngle firm (having as a<br>or agent) and the nam-<br>attorneys or agents. If<br>be printed.<br>type)                                                                                                                                                                                           | member a 2es of up to no name is 3ee is identified below, the d                                                                                         | ocument has been filed for                                                                                                             |  |
| la. The following fee(s) are Issue Fee Publication Fee (No s                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | e assignee category or category categor | 4b.;<br>[<br>d) [                                                                                     | Payment of I  A check i  Payment I  The Direct                                                                           | Fec(s):<br>in the amo<br>by credit<br>ector is he                                                       | ount of the fee(s) is end<br>card. Form PTO-2038<br>creby authorized by ch                                                                                                                                                                                                                    |                                                                                                                                                         | credit any overpayment, to                                                                                                             |  |
| 5. Change in Entity Status                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  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| a. Applicant claims Sl                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | MALL ENTITY status. See 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 37 CFR 1.27.                                                                                          | b. Applica                                                                                                               | ant is no                                                                                               | longer claiming SMAI                                                                                                                                                                                                                                                                          | LL ENTITY status. See 37 C                                                                                                                              | FR 1.27(g)(2).                                                                                                                         |  |
| The Director of the USPTO NOTE: The Issue Fee and Ponterest as shown by the reco                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | is requested to apply the Issu<br>ublication Fee (if required) words of the United States Pate                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | te Fee and Publication in the Fee and Publication in the fee accepted for the fee and Trademark C     | on Fee (if an<br>from anyone<br>office.                                                                                  | y) or to re<br>other tha                                                                                | e-apply any previously<br>in the applicant; a regi                                                                                                                                                                                                                                            | y paid issue fee to the applica<br>stered attorney or agent; or the                                                                                     | ation identified above.<br>ne assignee or other party in                                                                               |  |
| Authorized Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   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| Typed or printed name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  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| This collection of informatic<br>in application. Confidential<br>indumitting the completed applied applied applied applied and an analysis form and/or suggestions<br>and 1450, Alexandria, Virginal Conference and a suggestion of the applied applied and a suggestion of the applied | on is required by 37 CFR 1.3 ity is governed by 35 U.S.C. pplication form to the USPTG for reducing this burden, shinia 22313-1450. DO NOT 1.456                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 11. The information<br>122 and 37 CFR 1.<br>O. Time will vary dould be sent to the CEEND FEES OR CC   | is required t<br>14. This coll<br>epending up<br>Chief Inform<br>OMPLETED                                                | to obtain dection is to the interest of the interest of FORMS                                           | or retain a benefit by the estimated to take 12 nd dividual case. Any conficer, U.S. Patent and TO THIS ADDRESS                                                                                                                                                                               | ne public which is to file (and<br>ninutes to complete, includir<br>mments on the amount of ti<br>Trademark Office, U.S. Dep<br>. SEND TO: Commissioner | by the USPTO to process) ag gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450, |  |

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### UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE United States Patent and Trademark Office Address: COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, Virginia 22313-1450 www.uspto.gov

| APPLICATION NO.          | FILING DATE     | FIRST NAMED INVENTOR    | ATTORNEY DOCKET NO. | NO. CONFIRMATION NO. |  |
|--------------------------|-----------------|-------------------------|---------------------|----------------------|--|
| 08/889,355               | 07/08/1997      | HEIDRUN ENGLER          | 16930-000811        | 3379                 |  |
| 7                        | 590 07/26/2005  |                         | EXAMINER            |                      |  |
| WILLIAM M SN             |                 | WILSON, MICHAEL C       |                     |                      |  |
|                          | DEDO CHETER     | ART UNIT                | PAPER NUMBER        |                      |  |
| TWO EMBARCA<br>8TH FLOOR | DERO CNETER     | 1632                    |                     |                      |  |
| SAN FRANCISCO            | D, CA 941113834 | DATE MAILED: 07/26/2005 |                     |                      |  |

## Determination of Patent Term Extension under 35 U.S.C. 154 (b)

(application filed after June 7, 1995 but prior to May 29, 2000)

The Patent Term Extension is 0 day(s). Any patent to issue from the above-identified application will include an indication of the 0 day extension on the front page.

If a Continued Prosecution Application (CPA) was filed in the above-identified application, the filing date that determines Patent Term Extension is the filing date of the most recent CPA.

Applicant will be able to obtain more detailed information by accessing the Patent Application Information Retrieval (PAIR) WEB site (http://pair.uspto.gov).

Any questions regarding the Patent Term Extension or Adjustment determination should be directed to the Office of Patent Legal Administration at (571) 272-7702. Questions relating to issue and publication fee payments should be directed to the Customer Service Center of the Office of Patent Publication at (703) 305-8283.